## City of San Marcos City Council/Council Appointee Annual Financial Disclosure Form

Notes: 1. This report covers the reporting		d from January 1, 2012		City Clerk
2. Attach information on addition	al pag	es if necessary.		CED A 4 2012
Name: MEUSSA CUIT Residence address: 100 Ka	eer	1 Derick		City of O
Residence address: 100 Ka	thro	IIL CV.		City of San Marcos
SOO MARKUS TY 7	Blel	e co		
Title of position held with the City:				
Name of spouse (if applicable):				
Name of spouse (if applicable):Names of all dependent children (if applica	ible):_	Jazzlynm i	server 4	Dustin Derre-
Names under which you, your spouse, or a	iny of	your dependent children	do business:	
1. MELISSA DERRICK - X	<del>v 4u</del>	J /1/ / Co. C.	8	
2				
3			mounts and valu	06.
Note – You may use the following report	ung c	categories to describe a	Indunts and varu	cs.
		0 but less than \$10,000.		
		0.00 but less than \$20,0 0.00 but less than \$50,0		
(4) Category IV – At least §	550,00	0.00 but less than \$75,0	00.00	
		0.00 but less than \$100,		
(6) Category VI – \$100,000	0.00 or	more - report to nearest	\$100,000.	
1. Identify each source of income amounting any of your dependent children:	ng to n	nore than \$100.00 receiv	ed in the reporting	g period by you, your spouse, or
Name, address of income source		Nature of income (e.g	g., salary,	Amount of income (by
		dividends, rent, etc.)		reporting category)
Texas State universid	S)	SALAR-/		11_
1 7 2 2 1 1 1	Q			
2. Identify each option held, owned, acquireporting period:	ired o	r sold by you, your spou	se, or any of your	dependent children during the
Nature of option (real estate, stock, etc.)	1	ount of transaction (by	1 '	of other parties to the
	repo	rting category)	transaction	

Sanmarkos u	OICL SOLD MARCUS, TX 1860	Scretary	{	
			•	
4. Identify each business	entity, nonprofit entity or union th a fair market value of more th	in which you, your spot	use, or any of your de	ependent children h
Name, address of busine or nonprofit entity or union	Description of ownership interest (e.g., owner, partner, stockholder)	Value of ownership interest (by reporting category)	Number of shares held/ number of shares issued (if applicable)	Net gain or loss from sale of stoc (by reporting category)
Potus A.k. Cooching 109 Kataryn ev sar	m move Owner	工	1/1A	NIA
as owner, beneficial owr	erty in the City or ETJ in which your (holder of a mortgage), busing of stock of a corporation), or a less Name, address of owner(s) (if other than you, your spouse or children)	less owner (partner in a	partnership; or boar	Homestead exemption o this property
lebt of more than \$100.0	ness entities or guarantors to wh 0 during the reporting period (no ity, or loans to a political campa	ot including debts owed t	to persons related wit	hin the second deg
Name, address of person which debt was owed	, business entity or guarantor to	Amount of debt (by reporting category)	Amount of reporting per	

Name, address of person, business entite that owed the debt	y or guarantor	Amount of debt (by reporting category)	Amount of repayment during reporting period (by reporting category)
			reporting eurogery)
	1 00	6 6 1	0100 00 ' 1 ' 11
<ol> <li>Identify the source of each gift or acc he reporting period by you, your spous</li> </ol>	e, or any of your de	pendent children, or receive	ed by another person for the use
penefit of you, your spouse, or any of pecause of kinship, or 2) a gift received	your dependent chi	ldren (not including 1) a g	ift received from a relative if gi
rust established by a spouse or ancesto		succession of as alsalibation	n nom un meer vives er testamen
Name, address of source of gift(s)	Description of	gift(s)	Amount or value of gift(s) (by reporting category)
Samo R. Bragg	Check		I
Scesan e Bragg 1114 Jeniser Rd. Kehma TX 775/65	Check	K	正
1114 Jamiger Rd. Kehma			
Provided this information is not privi	leged by law if you	were the owner of 5% or m	nore of any business entity during
reporting period, list all customers from	leged by law, if you m whom the entity	were the owner of 5% or m received at least ten per of	nore of any business entity during cent of its gross income during
eporting period, list all customers from	m whom the entity	received at least ten per of	cent of its gross income during
eporting period, list all customers from eporting period:	m whom the entity	received at least ten per of	cent of its gross income during
eporting period, list all customers from eporting period:	m whom the entity	received at least ten per of	cent of its gross income during
eporting period, list all customers from eporting period:	m whom the entity	received at least ten per of	cent of its gross income during
reporting period, list all customers from reporting period:  Name, address of customer  Candy Swan -	aligonnes and no a and neg	received at least ten per of - Rife Conching only fured	is Con fraential
eporting period, list all customers from eporting period:  Name, address of customer  Candy Swen - Co	aliganne and no a anchisee of the C	received at least ten per of the Conchine only formed for the reporting	g period by you, your spouse, or
eporting period, list all customers from eporting period:  Name, address of customer  On the following period:  O. Identify any financial interest in any of your dependent children (note: france)	aligonne and no a archisee of the Cohise holders are A	received at least ten per of the Conching only for the conching only for the reporting of the reporting of the Warner Cable, B) I	g period by you, your spouse, or
eporting period, list all customers from eporting period:  Name, address of customer  Candy Source  O. Identify any financial interest in any of your dependent children (note: france) sluebonnet Electric Cooperative, and Elect	m whom the entity  alignment  and no a  franchisee of the Center holders are A  Description of	received at least ten per of the Conching only for the conching only for the reporting of the Warner Cable, B) It is gy Entex):	g period by you, your spouse, or Value of financial interest
eporting period, list all customers from eporting period:  Name, address of customer  Candy Summary  O. Identify any financial interest in any of your dependent children (note: france) sluebonnet Electric Cooperative, and Elec	m whom the entity  alignment  and no a  franchisee of the Center holders are A  Description of	received at least ten per of the Conchine warner Cable, B) Frey Entex):	g period by you, your spouse, or Pedernales Electric Cooperative
9. Provided this information is not privite reporting period, list all customers from reporting period:  Name, address of customer  Candy Jour - Candy Journ - Cand Journ - Candy Journ - Candy Journ - Candy Journ - Candy Journ	m whom the entity  alignment  and no a  franchisee of the Center holders are A  Description of	received at least ten per of the Conching only for the conching only for the reporting of the Warner Cable, B) It is gy Entex):	g period by you, your spouse, or Value of financial interest

Name of franchise holder	Description of transaction		Value of transaction (by reporting category)
isclosure applies to a fami	penalty of perjury that the ably member (as defined by Sec	ove statement is true are ction 176.001(2). Local	nd correct. I acknowledge that the Government Code) of this local
JAMIE LEE Notary Public, My Commis March C	PETTIJOHN State of Texas sion Expires 13, 2014	ent covers the 12-month	n period described by Section  Overnment Officer/Appointed Officia
JAMIE LEE Notary Public, My Commis	PETTIJOHN State of Texas sion Expires 13, 2014  / SEAL ABOVE	Signature of Local Go	n period described by Section